## **Carmel Unified School District**

## CLASSROOM VOLUNTEER AND FIELD TRIP CHAPERONE OR DRIVER APPLICATION

CUSD appreciates parent volunteer service. The District, however, needs to ensure that all volunteers maintain complete confidentiality regarding all student issues and agree to abide by all school rules and district policies. This form is to be completed by all regular classroom volunteers, field trip chaperones or drivers before serving in any of these capacities.

By signing this form you agree to these conditions while volunteering in CUSD.

## PLEASE COMPLETE AND RETURN TO THE SCHOOL OFFICE

TELAGE COMITELE AND RETORN TO THE SCHOOL OF TICE				
egal Name: Date of Birth:				
Your Student's Name(s):				
Volunteer at School Site(s):				
Your Occupation: Emp	loyer:			
Day Phone: Eve	ning Phone:			
Address:				
Driver's Lic. #: Stat	e:			
Availability (Circle all that apply): Mon / Tues / Wed / Thurs / Fri / Sat All Day / Mornings / Afternoons				
If you are driving a private vehicle, CUSD Form # 212a Vehicle Safety Certification and # 212b Auto Service Record must also be completed and on file with Carmel Unified School District.				
			Yes	No
Have you ever been convicted of a felony or entered a plea of "no contest" to a felony charge?				
Have you ever been convicted of a misdemeanor or entered a plea of "no contest to a misdemeanor charge?"				
Are you required to register as a sex offender?				
Are any criminal charges currently pending against you?				
If you answered "yes" to any of these questions, please explain on the back of this form.  A "yes" response may not necessarily disqualify you from volunteering.  I swear under penalty of perjury that the information I have provided is true. I understand that providing false information will disqualify me from volunteering. By my signature below, I certify that I have agreed to volunteer my services in the Carmel Unified School District. I acknowledge that I have agreed to perform				
these services without any promise or expectation of compe Unified School District in order to further a civic purpose.	nsation. I offer my servic	es freely to t	he Carr	nel
Signature: Date:				
Emergency Contact Numbers				
Name	Relationship	Phone		